JUN 1 6 2005 JUSTOMER NO. 23932

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AMENI	DMENT 1	ΓRANSMI	TTAL LE	TTER		ocket No. -00003USPX	
Application 10/036185-Conf		Filing Date Examiner December 28, 2001 P. R. Myers			Art Unit 2112		
Applicant(s): Miche	ele Borgatti et	al.			·		
Invention: ELECTR	ONIC SYSTE	EM HAVING N	IODULAR EX	(PANSION FUNCTI	ON FACI	LITIES	
	TC	THE COMMI	SSIONER F	OR PATENTS			
Transmitted herewi				• •			
The fee has been c	alculated art		S AS AMEN				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	12	- 20 =		x			
Independent Claims	4	- 3 =	1	x 200.00		200.00	
Multiple Depender	nt Claims (ch	eck if applicabl	e)				
Other fee (please s	specify):		 -				
TOTAL ADDITIO	NAL FEE FO	DD TING AME	NOMENT.			200.00	
TOTAL ADDITIO	NAL FEE FO	OR THIS AME	NUMENT:	Small Entity		200.00	
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No additional f	•						
Please charge A duplicate co	•			n the amount of \$ _		·	
X A check in the	amount of \$	200.00	to cover	the filing fee is encl	osed.		
Payment by cr	edit card. Fo	orm PTO-2038	is attached.				
				Deposit Account N	o. <u>10</u>)-0447	
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$=$ \times $/$	1 //		n nmcessina	fees required under 3	7 CFR 1	16 and 1 17	
AM	JD 1	у структи		,000,04404 440. 1			
Andre M. Szuwalski							
Attorney Reg. No.: 35,701							
JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION							
1445 Ross Avenue/Suite 3200 Dallas, Texas 75202							
(214) 855-4795							
I hereby certify that this a	orrespondence in	heing danceited	ith the IVS Door	al Seniife with sufficient or	nstane as Fir	est Class Mail in	
an envelope addressed to shown below.	I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Confinishioner for Patents, P.O. Box 450, Alexandria, VA 22313-1450, on the date shown below.						
Dated: June 13, 2005	Signature	M. Dew	Laur -	(Margo Barbara	sh)		

STOMER NO. 23932 PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. 10/036185-Conf. #4873 ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL December 28, 2001 Filing Date Michele Borgatti First Named Inventor For FY 2005 **Examiner Name** P. R. Myers Applicant claims small entity status. See 37 CFR 1.27 2112 Art Unit 61181-00003USPX TOTAL AMOUNT OF PAYMENT 200.00 (\$) Attorney Docket No. METHOD OF PAYMENT (check all that apply) x Check Credit Card Money Order None Other (please identify): Deposit Account Number: 10-0447 Deposit Account Name Jenkens & Gilchrist, a Professional Corporation Deposit Account For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 Utility 300 150 500 250 100 100 50 130 65 200 100 Design Plant 200 100 300 150 160 80

Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FI	EES							Small Entity
Fee Description							<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (i	ncluding Reissues	;)					50	25
Each independent cla				200	100			
Multiple dependent cl							360	180
Total Claims Extra Claims Fee (\$) Fee Pald (\$)					Multiple Dependent Claims			
12 - 20 =	x _	=			<u>Fee</u>	<u>(\$)</u>	Fee Paid (<u> </u>
Indep. Claims 4 - 3 =		Fee (\$) 200.00 =	Fee Paid 200.0					_

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	Extra Sheets	Number of	each additional 50 or fraction there	of <u>Fee (\$)</u>	ree Paid (\$)
- 100 =		50	(round up to a whole number)	x	=
4. OTHER FEE(S)	/ /				Fees Paid (\$)
Non-English Specific	ation, \$130 fee (no small engity	discount)		
Other (e.g., late files	Aurcharge:				
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SUBMITTED BY	/	1/1	<u>/// /</u>	$/\!\!/\!\!\!/$						
Signature	U	HO	7K/			Registration No. (Attorney/Agent)	35,701	Telephone	(214) 855-4795	
Name (Print/Type)	And	ire M	. Szuv	v ą ls	ski			Date	June 13, 2005	

I hereby certify that this con	respondence is being deposit MS Amendment, Companies of	ed with the U.S.	Postal Service	with sufficient postage as F	irst Class Mail, in
an envelope addressed to:	MS Amendment, Commission	ner for Patents,	P.O. Box 1450,	Alexandria, VA 22313-145	0, on the date
shown below.	AII	1 //	//		

Dated: June 13, 2005

Signature:

(Margo Barbarash)



FEE SUMMARY SHEET

Transmittal -- Amendment

Date:

June 13, 2005

Time:

1:58 PM

Docket:

61181-00003USPX

Filing Date:

e:

December 28, 2001

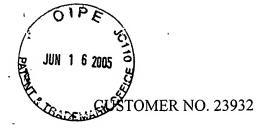
Application No:

10/036185

Total Fee:

\$ 200.00

Code	Amount	37 CFR	Fee Description	Listed on
1201	200.00	1.16(h)	Independent claims in excess of three	Fee Transmittal (PTO SB-17)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of:

Borgatti, et al.

Serial No.

10/036,185

Filed

December 28, 2001

99999999

Examiner: P. Meyers

Group Art Unit: 2112

For: Electronic System Having Modular Expansion Function Facilities

Mail Stop Amendment

Director of the US Patent and

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On:

ignature/ MARGO BARBARASH

Dear Sir:

AMENDMENT

Responsive to the Official Action dated March 14, 2005, reconsideration and allowance of the present application are respectfully requested and believed to be appropriate in view of the following remarks:

06/17/2005 DEMMANUI 00000019 10036185

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